Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

		CLAIMS AS	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SWALL ENTITY		
TOTAL CLAIMS			21		d distriction of the state of t			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEAB	BLE CLAIMS	2/ minus 20=		* /			X\$ 9=.		OR	X\$18=	18
INDEPENDENT CLAIMS			3 minus 3 =		* 0			X40=		OR	X80=	
MU	LTIPLE DEPEND	DENT CLAIM PF	RESENT					+135=		OR	+270=	
* If	the difference i	n column 1 is l	ess than zero, enter "0" in co			olumn 2	1	TOTAL		OR	TOTAL	728
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column						(Column 3)		SMALLE	NTITY	OR	OTHER SMALL	- 11
AMENDWENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL AINA	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JETIPLE DEP	ENDEN	1 CLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B	d	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST VIBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	IT OL AIR	=	44	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	II CLAIIV		_	+135=		OR	+270=	
							l	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	W. W	CLAIMS REMAINING AFTER AMENDMENT		NU PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
POS	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	j
Page 1	Independent	*	Minus	***		=		X40=	1	OR	V00	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	L	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												EL
	The "Highest Nur	mber Previously I	aid For" (Total o	or Indeper	ndent) is th	ne highest num	ber fo	und in the ap	propriate bo	x in c	olumn 1.	